

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the lines

SYNERGY PAC

ADDRESS (number and street)

6849 Old Dominion Drive

Suite 222

☐Check if different  
than previously  
reported. (ACC)

McLean

VA

22101

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00409623

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15  
Quarterly Report(Q1)☐July 15  
Quarterly Report(Q2)☐October 15  
Quarterly Report(Q3)☐January 31  
Quarterly Report(YE)☐July 31 Mid-Year  
Report(Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)  
(Non-Election  
Year Only)☐

Mar 20 (M3)

☒

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)  
(Non-Election  
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day  
**PRE**-Election  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

☐☐☐in the  
State of☐(d) 30-Day  
**Post**-Election  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

☐☐☐in the  
State of☐

5. Covering Period

05

01

2010

through

05

31

2010

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Leslie J. Kerman

Signature of Treasurer

Electronically Filed by Leslie J. Kerman

Date

06

08

2010

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 12/2004)



# SUMMARY PAGE

## OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

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Write or Type Committee Name  
SYNERGY PAC

Report Covering the Period: From: 

M	M
0	5

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	5

D	D
3	1

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <div>Y Y Y Y 2010</div>		137987.13
(b) Cash on Hand at Beginning of Reporting Period .....	132882.79	
(c) Total Receipts (from Line 19) .....	15000.00	91023.87
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	147882.79	229011.00
7. Total Disbursements (from Line 31) .....	24499.49	105627.70
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	123383.30	123383.30
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

### For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100



# DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

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Write or Type Committee Name  
SYNERGY PAC

Report Covering the Period:

From:

M M D D Y Y W Y  
0 5 0 1 2 0 1 0

To:

M M D D Y Y W Y  
0 5 3 1 2 0 1 0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(i) Itemized (use Schedule A) .....	0.00	0.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	0.00	9.56
(c) Other Political Committees (such as PACs) .....	15000.00	89014.31
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	15000.00	89023.87
12. Transfers From Affiliated/Other Party Committees .....	0.00	2000.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	15000.00	91023.87
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	15000.00	91023.87



## DETAILED SUMMARY PAGE

of Disbursements

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FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	0.00	0.00	
(ii) Non-Federal Share.....	0.00	0.00	
(b) Other Federal Operating Expenditures.....	1999.49	34627.70	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	1999.49	34627.70	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	22500.00	71000.00	
24. Independent Expenditure (use Schedule E) .....	0.00	0.00	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00	
26. Loan Repayments Made.....	0.00	0.00	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs) .....	0.00	0.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00	
29. Other Disbursements.....	0.00	0.00	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share .....	0.00	0.00	
(ii) "Levin" Share .....	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	24499.49	105627.70	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	24499.49	105627.70	



**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	15000.00	89023.87
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	15000.00	89023.87
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	1999.49	34627.70
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	1999.49	34627.70



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 11

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**SYNERGY PAC**

**A.** Full Name (Last, First, Middle Initial) **AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFIED** Date of Receipt

Mailing Address **1625 L STREET NW**

City State Zip Code  
**WASHINGTON DC 20036**

FEC ID number of contributing  
federal political committee.

**C** C00011114

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

M M / D D / Y Y Y Y Y  
**0 5 / 2 6 / 2 0 1 0**

**Transaction ID: SA11C.6030**

Amount of Each Receipt this Period

2500.00

Contribution

**B.** Full Name (Last, First, Middle Initial) **AMERICAN FEDERATION OF TEACHERS, AFL-CIO COMMITTEE ON POLITICAL EDUCATION** Date of Receipt

Mailing Address **555 New Jersey Avenue, NW**

City State Zip Code  
**Washington DC 20001**

FEC ID number of contributing  
federal political committee.

**C** C00028860

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

M M / D D / Y Y Y Y Y  
**0 5 / 2 8 / 2 0 1 0**

**Transaction ID: SA11C.6029**

Amount of Each Receipt this Period

5000.00

Contribution

**C.** Full Name (Last, First, Middle Initial) **ANHEUSER-BUSCH COMPANIES INC. POLITICAL ACTION COMMITTEE** Date of Receipt

Mailing Address **ONE BUSCH PLACE 202-5**

City State Zip Code  
**ST. LOUIS MO 63118**

FEC ID number of contributing  
federal political committee.

**C** C00034488

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

M M / D D / Y Y Y Y Y  
**0 5 / 2 6 / 2 0 1 0**

**Transaction ID: SA11C.6031**

Amount of Each Receipt this Period

5000.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

12500.00

**TOTAL** This Period (last page this line number only) .....



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 11

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
------------------------------	------------------------------	---	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

SYNERGY PAC

**A.**

Full Name (Last, First, Middle Initial)

GLAXOSMITHKLINE LLC POLITICAL ACTION COMMITTEE (GSK PAC)

Mailing Address Five Moore Drive P.O. Box 13358  
P.O. Box 13358

City	State	Zip Code
Res. Triangle Park	NC	27709

FEC ID number of contributing  
federal political committee.**C** C00199703

Name of Employer

Occupation

Receipt For:

☐ Primary
 ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	7		2	0	1	0

Transaction ID: SA11C.6027

Amount of Each Receipt this Period

2500.00

Contribution

SUBTOTAL of Receipts This Page (optional) .....

2500.00

TOTAL This Period (last page this line number only) .....

15000.00



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 8 / 11

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SYNERGY PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) American Express <hr/> Mailing Address    P.O. Box 297812 <hr/> <table> <tr> <td>City Ft. Lauderdale</td> <td>State FL</td> <td>Zip Code 33329-7812</td> </tr> </table> <hr/> <table> <tr> <td>Purpose of Disbursement See Memo Below.</td> <td rowspan="2"><div>Category/ Type</div></td> </tr> <tr> <td>Candidate Name</td> </tr> </table> <hr/> <table> <tr> <td>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</td> <td>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</td> </tr> <tr> <td>State:                  District:</td> <td></td> </tr> </table>	City Ft. Lauderdale	State FL	Zip Code 33329-7812	Purpose of Disbursement See Memo Below.	<div>Category/ Type</div>	Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State:                  District:		<b>Transaction ID:</b> SB21B.6032 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 2 7 / 2 0 1 0</div> </div> <hr/> <b>Amount of Each Disbursement this Period</b> <div>474.49</div>
City Ft. Lauderdale	State FL	Zip Code 33329-7812										
Purpose of Disbursement See Memo Below.	<div>Category/ Type</div>											
Candidate Name												
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼											
State:                  District:												
<b>B.</b>	Full Name (Last, First, Middle Initial) Westin Verasa <hr/> Mailing Address    1314 McKinstry St. <hr/> <table> <tr> <td>City Napa</td> <td>State CA</td> <td>Zip Code 94559</td> </tr> </table> <hr/> <table> <tr> <td>Purpose of Disbursement PAC Fundraiser: Hotel Charges</td> <td rowspan="2"><div>Category/ Type</div></td> </tr> <tr> <td>Candidate Name</td> </tr> </table> <hr/> <table> <tr> <td>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</td> <td>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</td> </tr> <tr> <td>State:                  District:</td> <td></td> </tr> </table>	City Napa	State CA	Zip Code 94559	Purpose of Disbursement PAC Fundraiser: Hotel Charges	<div>Category/ Type</div>	Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State:                  District:		<b>Transaction ID:</b> SB21B.6032.2 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 1 0 / 2 0 1 0</div> </div> <hr/> <b>Amount of Each Disbursement this Period</b> <div>404.78</div> <div>[MEMO ITEM]</div>
City Napa	State CA	Zip Code 94559										
Purpose of Disbursement PAC Fundraiser: Hotel Charges	<div>Category/ Type</div>											
Candidate Name												
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼											
State:                  District:												
<b>C.</b>	Full Name (Last, First, Middle Initial) The Waverly Group, Inc. <hr/> Mailing Address    6849 Old Dominion Dr. Suite 222 <hr/> <table> <tr> <td>City McLean</td> <td>State VA</td> <td>Zip Code 22101</td> </tr> </table> <hr/> <table> <tr> <td>Purpose of Disbursement PAC Mang't./Compliance: Fees and Expenses</td> <td rowspan="2"><div>Category/ Type</div></td> </tr> <tr> <td>Candidate Name</td> </tr> </table> <hr/> <table> <tr> <td>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</td> <td>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</td> </tr> <tr> <td>State:                  District:</td> <td></td> </tr> </table>	City McLean	State VA	Zip Code 22101	Purpose of Disbursement PAC Mang't./Compliance: Fees and Expenses	<div>Category/ Type</div>	Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State:                  District:		<b>Transaction ID:</b> SB21B.6017 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 0 3 / 2 0 1 0</div> </div> <hr/> <b>Amount of Each Disbursement this Period</b> <div>1525.00</div>
City McLean	State VA	Zip Code 22101										
Purpose of Disbursement PAC Mang't./Compliance: Fees and Expenses	<div>Category/ Type</div>											
Candidate Name												
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼											
State:                  District:												

**SUBTOTAL** of Disbursements This Page (optional) .....

1999.49

**TOTAL** This Period (last page this line number only) .....

1999.49



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
SYNERGY PAC

A.

Full Name (Last, First, Middle Initial)

ADLER FOR CONGRESS

Mailing Address 14 KNIGHTSWOOD DRIVE

City MARLTON State NJ Zip Code 08053

Purpose of Disbursement  
Contribution

Candidate Name  
JOHN H ADLER

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2010  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: NJ District: 03

Transaction ID: SB23.6023

Date of Disbursement

/   /

Amount of Each Disbursement this Period

B.

Full Name (Last, First, Middle Initial)

BETTY SUTTON FOR CONGRESS

Mailing Address 1700 W MARKET ST #155

City AKRON State OH Zip Code 44313

Purpose of Disbursement  
Contribution

Candidate Name  
BETTY S MS. SUTTON

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2010  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: OH District: 13

Transaction ID: SB23.6021

Date of Disbursement

/   /

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)

DINA TITUS FOR CONGRESS

Mailing Address P. O. Box 50614  
Suite C5

City Henderson State NV Zip Code 89016

Purpose of Disbursement  
Contribution

Candidate Name  
DINA TITUS

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2010  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: NV District: 03

Transaction ID: SB23.6024

Date of Disbursement

/   /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional) .....

TOTAL This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 10 / 11

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
SYNERGY PAC

**A.**

Full Name (Last, First, Middle Initial)  
HOOSIERS FOR HILL

Mailing Address PO Box 1071

City Seymour State IN Zip Code 47274

Purpose of Disbursement  
Contribution

Candidate Name  
BARON P HILL

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2010  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: IN District: 09

Transaction ID: SB23.6015

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5000.00

**B.**

Full Name (Last, First, Middle Initial)  
KILROY FOR CONGRESS

Mailing Address 929 Harrison Ave  
Ste 305

City Columbus State OH Zip Code 43215

Purpose of Disbursement  
Contribution

Candidate Name  
MARY JO KILROY

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2010  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: OH District: 15

Transaction ID: SB23.6018

Date of Disbursement

/   /

Amount of Each Disbursement this Period

4000.00

**C.**

Full Name (Last, First, Middle Initial)  
LARRY KISSELL FOR CONGRESS

Mailing Address PO Box 1530  
106 East Main Street

City Biscoe State NC Zip Code 27209

Purpose of Disbursement  
Contribution

Candidate Name  
LARRY KISSELL

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2010  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: NC District: 08

Transaction ID: SB23.6019

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2500.00

**SUBTOTAL** of Disbursements This Page (optional) .....

11500.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 11 / 11

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SYNERGY PAC

A.

Full Name (Last, First, Middle Initial)

ZACK SPACE FOR CONGRESS COMMITTEE

Mailing Address 714 N WOOSTER AVENUE

City  
DOVER

State  
OH

Zip Code  
44622

Purpose of Disbursement  
Contribution

Candidate Name  
ZACHARY T SPACE

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2010  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: OH District: 18

Transaction ID: SB23.6020

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional) .....

2500.00

TOTAL This Period (last page this line number only) .....

22500.00